

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 623985	RECEIPT DATE:	09 / 12 / 00
IA NUMBER:	PCT/ EP99 / 01600	IA FILING DATE:	03 / 11 / 99
FAMILY NAME:	KONEN	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	WOLFGANG	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	03 / 12 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	GRU 108 NP	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 2026591915
			FAX

NAME: RABIN & CHAMPAGNE

STREET: SUITE 500  
1101 14TH STREET NW

CITY: WASHINGTON

STATE/COUNTRY: USX ZIP: 20005

EMAIL:

APPLICATION TITLES:

METHOD FOR VERIFYING THE AUTHENTICITY OF AN IMAGE RECORDED IN A PERSON  
IDENTIFYING PROCESS

TAB TO LAST POSITION,PUSH SEND